

North Regional Time Sensitive Emergency Committee (NRTSEC)

Meeting Minutes

January 29, 2016

Opening

The regular meeting of the North Regional Time Sensitive Emergency Committee (NRTSEC) was called to order at 1003 on January 29, 2016 at Kootenai Health by Chair Chris Way.

Present

Chris Way, Julie Hoerner, Ben Suttlemyre, Nicole Wheaton, Veronica Jones, Nick Mechikoff, Chris Land, Tom Nickol, Steve Isaacson, Bill Keely, Eric Chun, Bill Holstein, Shelly Mattson, Casey Meza, Dershi Bussey. On the phone: Christian Surjan, Stu Willis, Mike Taylor, Caryl Johnston, Ken Baker, Wanda Wilkerson

Approval of Agenda

Motion to approve agenda made by Tom Nickol, seconded by Eric Chun. Approved unanimously.

Approval of Minutes:

Motion to approve minutes from November 20, 2015 as written by Tom Nickol, seconded by Eric Chun. Approved unanimously.

Open Issues

1. TSE State-wide Meeting Update - Chris Way
 - Applications for state verification are all finalized and approved. The State has begun receiving their first applications. KH will be sending in trauma application next week.
 - The Legislature has approved the TSE rules, and the TSE program will no longer be on temporary rules. Since then, there have been a few minor changes needed to the applications, which will have to wait for the next legislative session to be approved, so in the interim the applicant will have to apply for waivers on those items requiring those small changes.
 - Next week state will be meeting with those involved in CARES network (Cardiac Arrest Registry to Enhance Survival - www.mycares.net) regarding the feasibility of implementing it statewide (currently in use in the southern part of the state). It does require a hospital participation component and the discussion will be around how to engage hospitals. This is no longer a free service. Discussion will be around how to pay those, either as a state or individual entities,

if CARES is adopted. Christian will be presenting info from the CDC regarding CARES at this meeting, and Chris will be participating in the meeting.

2. TSE Program Update – Christian Surjan (via phone). Christian verified the above report, and stated there is some work occurring around updating the TSE Logo.

Old Business

Trauma Patient Criteria – Chris reminded all that we voted as a council to accept state's activation criteria. We need to decide when and how to implement this as a council. The state does not dictate how we respond to these criteria. Rather, the activation criteria is a for standardized data collection to allow for comparison in our region and as a state, as well as a tool that allows us to all define trauma and bill for it under 68x. It is an expectation that if you are verified as with the state trauma system, you will be required to use this activation criteria. Bill Holstein also noted that this can be viewed as a communication tool between entities to make sure we are all speaking the same language.

Discussion occurred around choosing a date to deploy the criteria for all the region to use. Bill Holstein states SMC does not have info yet as to whether they are going to commit to becoming a verified trauma center, so he is concerned about whether or not we should be educating to this in his area. Chris noted that now that we have the application available, we can start going out and visiting entities around the region and engaging and educating county officials, hospitals, EMS agencies to help with this process. Jamie Karambay had begun the process of working on the educational PowerPoint through the Education Committee.

The original decision at the November 2015 meeting had been to start using the criteria March 1st 2016. BCH, Gritman, BCCH all feel that is a reasonable timeline. KH requests April 1st, 2016 in order to have enough time to make changes to printed materials, how hospital codes are called, etc. Motion for April 1 Nickol, Nicole Wheaton seconded.

Nick noted that it is a good tool for the QI process (currently we all define trauma differently, so we don't even know how many trauma patients we have in Idaho).

New Business

- a. Vice Chair Election – Officers are elected on first meeting of the year (considered the Annual Meeting). On even years, vice chair elections are held. Dr. May has declined to continue as vice chair. Dr. Karambay has declined to be nominated. Chris opened floor to nominations. Ben Suttlemyre volunteered. Bill Holstein nominated him, seconded by Nick Mechikoff. No further nominations were

received. A motion to close nominations and to unanimously elect Ben Suttlemyre as Vice Chair was made by Bill Holstein, seconded by Dr. Chu. Dr. Nickol pointed out that with 2 flight services, want to make sure that it would not negatively impact relationships, to which both representatives from the flight services maintained that they frequently serve together on the same committees and it has not ever been an issue, The motion passed unanimously.

- b. Sub-committee appointment – Chris noted that the by-laws allowing panhandle representation on the QI subcommittee has not occurred yet, but will before the next meeting. Chris appointed Nick Mechikoff as Interim Chair until the bylaws have been changed and voted on by the body, at the next meeting
- c. QI Process - Nick presented that the QI committee is considering following the Region 2 QI model, with self-identified individual case review, cases redacted and placed in report and sent up to committee chair for collating into a report. Nick will be convening the subcommittee soon to begin building the process. Nick asked if it would be beneficial for offering CEUs to committee members who are in the reviews. The group agreed that this is a great idea. Chris recommended that the committee review both cases that went very well as well as those that did not go as well. Ben Suttlemyre noted that the East Region is currently using this example, following the patient through all the way to Rehab. Casey noted that these need to be self-identified because the State does not have identified review triggers. Casey recommended using some of the Trauma Registry data to enhance the development of the Region's QI process. Bill Keely pointed out that it would be beneficial for the state to be funneling back to the regions data submitted to the state. Motion made by Dr. Nickol for Chris and Casey to take a recommendation (official letter) to share the data received by the state among the stakeholders. At this point, Christian stated that through EMS bureau and Regionally, we can already request that data through the state. Region 4 is using that data for baseline (dwell times in ED, scene times, etc). Chris stated this is the first he has heard of this, and requests this data from Christian. Christian and Chris will get together and determine what data is available for the regional group to analyze. Casey recommended that the State determine at least 2 data points that the entire state collects. Chris and Casey will take this discussion to the state.
- d. Application Process for Trauma Centers - currently open. Stoke and STEMI are also open. The State does not have Level I trauma or Pediatric level I and II trauma center applications in place because there currently are not hospitals that can meet that criteria..

- e. Increasing Activity/Involvement Casey will be convening a team to go out to hospitals and sit down with key stakeholders and go through the website and application process and answer any questions. Chris will work with Jamie to get PowerPoint completed and assess where it would benefit for Casey's teams to go.

Other Business

-Information only: Panhandle Health District will be putting out a survey to our regions EMS agencies to seek some TSE-specific information for Stroke, STEMI and Trauma to help NRTSEC to get some info about what is available in our region. Will be completed by the end of June. Survey is under development currently

Action Items for Next Meeting

- Subcommittees to meet before the next General Meeting in March.
- Bylaws change.
- Chris will get with State to determine what data points are available.

Adjournment

Motion to adjourn by Bill Holstein , seconded by Ben Suttlemyre. Meeting was adjourned at 1114 by Chris Way. The next general meeting will be **March 18, 2016 at 10:00 in Kootenai Health Boardroom (Kootenai Services Building). Subcommittees will meet prior to March General Meeting.**

Minutes respectfully submitted by:

Julie Hoerner, NRTSEC Secretary